


<b>INVITATION TO BID</b>  STATE OF LOUISIANA DIVISION OF ADMINISTRATION OFFICE OF STATE PURCHASING				BIDS WILL BE PUBLICLY OPENED:  <div style="font-size: 1.2em; font-weight: bold;">MAY 27, 2009    10:00 AM</div>																													
=====> <b>VENDOR NO. :</b> <b>SOLICITATION :</b> 2233773 <b>FILE NO. :</b> Q11727N <b>OPENING DATE :</b> 05/27/09  <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 10px;"></div> <div style="position: absolute; top: 0; left: 0; width: 100%; height: 100%; background-color: white; border: 1px solid black; display: flex; align-items: center; justify-content: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold;">VENDOR NAME AND ADDRESS</div> </div>		<b>PURCHASING AGENCY NO. :</b> 107001  <b>SEE NO. 8 BELOW. RETURN BID TO</b>  <div style="display: flex; justify-content: space-between;"> <span>2233773</span> <span>05/27/09</span> <span>10:00 AM Q11727N</span> </div> <p><b>OFFICE OF STATE PURCHASING</b>  <b>OFFICE OF STATE PURCHASING</b>  <b>POST OFFICE BOX 94095</b>  <b>BATON ROUGE, LA 70804-9095</b></p>																															
<div style="border: 1px solid black; padding: 10px; margin: 10px auto; width: 80%;"> <b>FILL IN VENDOR NUMBER (FEIN), NAME AND ADDRESS ABOVE, BEFORE SUBMITTING BID.</b> </div>		<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"><b>BUYER</b></td> <td style="width: 40%;">: JANELLE BROWN</td> </tr> <tr> <td><b>BUYER PHONE</b></td> <td>: (225) 342-8036</td> </tr> <tr> <td><b>DATE ISSUED</b></td> <td>: 05/06/09</td> </tr> <tr> <td><b>REQ. AGENCY</b></td> <td>: 326701</td> </tr> <tr> <td colspan="2" style="text-align: right;">FOLD HERE--&gt;</td> </tr> <tr> <td colspan="2" style="text-align: center;"><b>DHH-OFFICE OF PUBLIC HEALTH</b></td> </tr> <tr> <td><b>AGENCY REQ. NO.</b></td> <td>: 3267011006</td> </tr> <tr> <td><b>ISIS REQ. NO.</b></td> <td>: 1323328</td> </tr> <tr> <td><b>VENDOR PHONE</b></td> <td>:</td> </tr> <tr> <td><b>FISCAL YEAR</b></td> <td>: 10</td> </tr> <tr> <td><b>CLASS/SUBCLASS</b></td> <td>: 19360</td> </tr> <tr> <td><b>SCHEDULED BEGIN DATE</b></td> <td>: 00/00/00</td> </tr> <tr> <td><b>SCHEDULED END DATE</b></td> <td>: 00/00/00</td> </tr> <tr> <td><b>T-NUMBER</b></td> <td>:</td> </tr> </table>				<b>BUYER</b>	: JANELLE BROWN	<b>BUYER PHONE</b>	: (225) 342-8036	<b>DATE ISSUED</b>	: 05/06/09	<b>REQ. AGENCY</b>	: 326701	FOLD HERE-->		<b>DHH-OFFICE OF PUBLIC HEALTH</b>		<b>AGENCY REQ. NO.</b>	: 3267011006	<b>ISIS REQ. NO.</b>	: 1323328	<b>VENDOR PHONE</b>	:	<b>FISCAL YEAR</b>	: 10	<b>CLASS/SUBCLASS</b>	: 19360	<b>SCHEDULED BEGIN DATE</b>	: 00/00/00	<b>SCHEDULED END DATE</b>	: 00/00/00	<b>T-NUMBER</b>	:
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<i>RENTAL EQUIP/SYPHILIS/HIV TEST KITS FOR DHH-MANDATORY JOBSITE VISIT IS REQUIRED</i>																																	
<b>TO BE COMPLETED BY VENDOR</b>																																	
1. _____ PLEASE REMOVE FROM THIS COMMODITY CODE. 2. _____ DELIVERY WILL BE MADE IN THIS NUMBER OF DAYS AFTER RECEIPT OF ORDER. 3. _____ % CASH DISCOUNT FOR PROMPT PAYMENT IF MADE WITHIN THIRTY (30) DAYS. CASH DISCOUNTS FOR LESS THAN 30 DAYS OR LESS THAN 1% WILL BE ACCEPTED, BUT WILL NOT BE CONSIDERED IN DETERMINING AWARDS. ON INDEFINITE QUANTITY TERM CONTRACTS, CASH DISCOUNTS WILL BE ACCEPTED AND TAKEN BUT WILL NOT BE CONSIDERED IN DETERMINING AWARDS. 4. _____ BID BOND ATTACHED, _____ CERTIFIED CHECK ATTACHED, _____ OTHER, IF REQUIRED. 5. _____ BID REFERENCE NUMBER. (THIS NUMBER WILL APPEAR ON RESULTING ORDER OR CONTRACT).																																	
<b>INSTRUCTIONS TO BIDDERS</b>																																	
1. READ THE ENTIRE BID, INCLUDING ALL TERMS AND CONDITIONS AND SPECIFICATIONS. 2. ALL BID PRICES MUST BE TYPED OR WRITTEN IN INK. ANY CORRECTIONS, ERASURES OR OTHER FORMS OF ALTERATION TO UNIT PRICES SHOULD BE INITIALED BY THE BIDDER. 3. THIS BID IS TO BE MANUALLY SIGNED IN INK. <span style="float: right;">FOLD HERE--&gt;</span> 4. BID PRICES SHALL INCLUDE DELIVERY OF ALL ITEMS F.O.B. DESTINATION OR AS OTHERWISE PROVIDED. BIDS CONTAINING "PAYMENT IN ADVANCE" OR "C.O.D" REQUIREMENTS MAY BE REJECTED. PAYMENT IS TO BE MADE WITHIN 30 DAYS AFTER RECEIPT OF PROPERLY EXECUTED INVOICE OR DELIVERY, WHICHEVER IS LATER. 5. AMOUNT OF BID BOND REQUIRED: _____ N/A _____ . 6. AMOUNT OF PERFORMANCE BOND, IF REQUIRED. _____ OR _____ 0% _____ OF BID. 7. DESIRED DELIVERY: _____ 010DAYS ARO 8. TO ASSURE CONSIDERATION OF YOUR BID, ALL BIDS AND ADDENDA SHOULD BE RETURNED IN AN ENVELOPE OR PACKAGE CLEARLY MARKED WITH THE BID OPENING DATE AND THE BID NUMBER, OR SUBMITTED IN THE SPECIAL ENVELOPE IF FURNISHED FOR THAT PURPOSE. 9. BIDS SUBMITTED ARE SUBJECT TO PROVISIONS OF THE LAWS OF THE STATE OF LOUISIANA INCLUDING BUT NOT LIMITED TO L.R.S. 39:1551-1736; PURCHASING RULES AND REGULATIONS; EXECUTIVE ORDERS; STANDARD TERMS AND CONDITIONS; SPECIAL CONDITIONS; AND SPECIFICATIONS LISTED IN THIS SOLICITATION. 10. IMPORTANT: BY SIGNING THE BID, THE BIDDER CERTIFIES COMPLIANCE WITH ALL INSTRUCTIONS TO BIDDERS, TERMS, CONDITIONS AND SPECIFICATIONS, AND FURTHER CERTIFIES THAT THIS BID IS MADE WITHOUT COLLUSION OR FRAUD. THIS BID IS TO BE MANUALLY SIGNED IN INK BY A PERSON AUTHORIZED TO BIND THE VENDOR (SEE NO.30). ALL BID INFORMATION SHALL BE MADE WITH INK OR TYPEWRITTEN.																																	
<b>VENDOR PHONE NUMBER:</b> <b>FAX NUMBER:</b>		<b>TITLE</b>		<b>DATE</b>																													
<b>SIGNATURE OF AUTHORIZED BIDDER - SEE NO. 30, PAGE 3.</b> <b>(MUST BE SIGNED)</b>			<b>NAME OF BIDDER</b> <b>(TYPED OR PRINTED)</b>																														

STANDARD TERMS & CONDITIONS		INVITATION TO BID	
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<p>11 ADDRESS ALL INQUIRIES AND CORRESPONDENCE TO THE BUYER AT THE PHONE AND ADDRESS SHOWN ABOVE.</p> <p>12. CONFERENCE: NA NA NA</p> <p>13. BID FORMS. ALL WRITTEN BIDS, UNLESS OTHERWISE PROVIDED FOR, MUST BE SUBMITTED ON, AND IN ACCORDANCE WITH, FORMS PROVIDED, PROPERLY SIGNED (SEE NO. 30). BIDS SUBMITTED IN THE FOLLOWING MANNER WILL NOT BE ACCEPTED: A. BID CONTAINS NO SIGNATURE INDICATING INTENT TO BE BOUND; B. BID FILLED OUT IN PENCIL; AND C. BID NOT SUBMITTED ON THE STATE'S STANDARD FORMS.</p> <p>BIDS MUST BE RECEIVED AT THE ADDRESS SPECIFIED IN THE SOLICITATION PRIOR TO BID OPENING TIME IN ORDER TO BE CONSIDERED. TELEGRAPHIC AND FAX ALTERATIONS TO BIDS RECEIVED BEFORE BID OPENING TIME WILL BE CONSIDERED PROVIDED FORMAL BID AND WRITTEN ALTERATION HAVE BEEN RECEIVED AND TIME-STAMPED BEFORE BID OPENING TIME. ENTIRE BID SHOULD BE RETURNED, EXCEPT ITEM PAGES NOT BID.</p> <p>14. STANDARDS OF QUALITY. ANY PRODUCT OR SERVICE BID SHALL CONFORM TO ALL APPLICABLE FEDERAL AND STATE LAWS AND REGULATIONS AND THE SPECIFICATIONS CONTAINED IN THE SOLICITATION. UNLESS OTHERWISE SPECIFIED IN THE SOLICITATION, ANY MANUFACTURER'S NAME, TRADE NAME, BRAND NAME, OR CATALOG NUMBER USED IN THE SPECIFICATION IS FOR THE PURPOSE OF DESCRIBING THE STANDARD OF QUALITY, PERFORMANCE, AND CHARACTERISTICS DESIRED AND IS NOT INTENDED TO LIMIT OR RESTRICT COMPETITION. BIDDER MUST SPECIFY THE BRAND AND MODEL NUMBER OF THE PRODUCT OFFERED IN HIS BID. BIDS NOT SPECIFYING BRAND AND MODEL NUMBER SHALL BE CONSIDERED AS OFFERING THE EXACT PRODUCTS SPECIFIED IN THE SOLICITATION.</p> <p>15. DESCRIPTIVE INFORMATION. BIDDERS PROPOSING AN EQUIVALENT BRAND OR MODEL SHOULD SUBMIT WITH THE BID INFORMATION (SUCH AS ILLUSTRATIONS, DESCRIPTIVE LITERATURE, TECHNICAL DATA) SUFFICIENT FOR STATE OF LOUISIANA TO EVALUATE QUALITY, SUITABILITY, AND COMPLIANCE WITH THE SPECIFICATIONS IN THE SOLICITATION. FAILURE TO SUBMIT DESCRIPTIVE INFORMATION MAY CAUSE BID TO BE REJECTED. ANY CHANGE MADE TO A MANUFACTURER'S PUBLISHED SPECIFICATIONS SUBMITTED FOR A PRODUCT SHALL BE VERIFIABLE BY THE MANUFACTURER. IF ITEM(S) BID DO NOT FULLY COMPLY WITH SPECIFICATIONS (INCLUDING BRAND AND/OR PRODUCT NUMBER), BIDDER MUST STATE IN WHAT RESPECT ITEM(S) DEVIATE. FAILURE TO NOTE EXCEPTIONS ON THE BID FORM WILL NOT RELIEVE THE SUCCESSFUL BIDDER(S) FROM SUPPLYING THE ACTUAL PRODUCTS REQUESTED.</p> <p>16. BID OPENING. BIDDERS MAY ATTEND THE BID OPENING, BUT NO INFORMATION OR OPINIONS CONCERNING THE ULTIMATE CONTRACT AWARD WILL BE GIVEN AT THE BID OPENING OR DURING THE EVALUATION PROCESS. BIDS MAY BE EXAMINED WITHIN 72 HOURS AFTER BID OPENING. INFORMATION PERTAINING TO COMPLETED FILES MAY BE SECURED BY VISITING THE STATE OF LOUISIANA DURING NORMAL WORKING HOURS. WRITTEN BID TABULATIONS WILL NOT BE FURNISHED.</p> <p>17. AWARDS. THE STATE OF LOUISIANA RESERVES THE RIGHT TO AWARD ITEMS SEPARATELY, GROUPED OR ON AN ALL-OR-NONE BASIS AND TO REJECT ANY OR ALL BIDS AND WAIVE ANY INFORMALITIES.</p> <p>18. PRICES . UNLESS OTHERWISE SPECIFIED BY THE STATE OF LOUISIANA IN THE SOLICITATION, BID PRICES MUST BE COMPLETE, INCLUDING TRANSPORTATION PREPAID BY BIDDER TO DESTINATION AND FIRM FOR ACCEPTANCE FOR A MINIMUM OF 30 DAYS. IF ACCEPTED, PRICES MUST BE FIRM FOR THE CONTRACTUAL PERIOD. BIDS OTHER THAN F.O.B. DESTINATION MAY BE REJECTED. PRICES SHOULD BE QUOTED IN THE UNIT (EACH, BOX, CASE, ETC.) AS SPECIFIED IN THE SOLICITATION.</p> <p>19. DELIVERIES. BIDS MAY BE REJECTED IF THE DELIVERY TIME INDICATED IS LONGER THAN THAT SPECIFIED IN THE SOLICITATION.</p> <p>20. TAXES. VENDOR IS RESPONSIBLE FOR INCLUDING ALL APPLICABLE TAXES IN THE BID PRICE. STATE AGENCIES ARE EXEMPT FROM ALL STATE AND LOCAL SALES AND USE TAXES.</p>			

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<p>21. NEW PRODUCTS.</p> <p>UNLESS SPECIFICALLY CALLED FOR IN THE SOLICITATION, ALL PRODUCTS FOR PURCHASE MUST BE NEW, NEVER PREVIOUSLY USED, AND THE CURRENT MODEL AND/OR PACKAGING. NO REMANUFACTURED, DEMONSTRATOR, USED OR IRREGULAR PRODUCT WILL BE CONSIDERED FOR PURCHASE UNLESS OTHERWISE SPECIFIED IN THE SOLICITATION. THE MANUFACTURER'S STANDARD WARRANTY WILL APPLY UNLESS OTHERWISE SPECIFIED IN THE SOLICITATION.</p> <p>22. CONTRACT RENEWALS.</p> <p>UPON AGREEMENT OF THE STATE OF LOUISIANA AGENCY AND THE CONTRACTOR, A TERM CONTRACT MAY BE EXTENDED FOR 2 ADDITIONAL 12-MONTH PERIODS AT THE SAME PRICES, TERMS AND CONDITIONS. IN SUCH CASES, THE TOTAL CONTRACT TERM CANNOT EXCEED 36 MONTHS.</p> <p>23. CONTRACT CANCELLATION.</p> <p>THE STATE OF LOUISIANA HAS THE RIGHT TO CANCEL ANY CONTRACT, IN ACCORDANCE WITH PURCHASING RULES AND REGULATIONS, FOR CAUSE, INCLUDING BUT NOT LIMITED TO, THE FOLLOWING: (1) FAILURE TO DELIVER WITHIN THE TIME SPECIFIED IN THE CONTRACT; (2) FAILURE OF THE PRODUCT OR SERVICE TO MEET SPECIFICATIONS, CONFORM TO SAMPLE QUALITY OR TO BE DELIVERED IN GOOD CONDITION; (3) MISREPRESENTATION BY THE CONTRACTOR; (4) FRAUD, COLLUSION, CONSPIRACY OR OTHER UNLAWFUL MEANS OF OBTAINING ANY CONTRACT WITH THE STATE; (5) CONFLICT OF CONTRACT PROVISIONS WITH CONSTITUTIONAL OR STATUTORY PROVISIONS OF STATE OR FEDERAL LAW; (6) ANY OTHER BREACH OF CONTRACT.</p> <p>24. DEFAULT OF CONTRACTOR.</p> <p>FAILURE TO DELIVER WITHIN THE TIME SPECIFIED IN THE BID WILL CONSTITUTE A DEFAULT AND MAY CAUSE CANCELLATION OF THE CONTRACT. WHERE THE STATE HAS DETERMINED THE CONTRACTOR TO BE IN DEFAULT, THE STATE RESERVES THE RIGHT TO PURCHASE ANY OR ALL PRODUCTS OR SERVICES COVERED BY THE CONTRACT ON THE OPEN MARKET AND TO CHARGE THE CONTRACTOR WITH COST IN EXCESS OF THE CONTRACT PRICE. UNTIL SUCH ASSESSED CHARGES HAVE BEEN PAID, NO SUBSEQUENT BID FROM THE DEFAULTING CONTRACTOR WILL BE CONSIDERED.</p> <p>25. ORDER OF PRIORITY.</p> <p>IN THE EVENT THERE IS A CONFLICT BETWEEN THE INSTRUCTIONS TO BIDDERS OR STANDARD CONDITIONS AND THE SPECIAL CONDITIONS, THE SPECIAL CONDITIONS SHALL GOVERN.</p> <p>26. APPLICABLE LAW.</p> <p>ALL CONTRACTS SHALL BE CONSTRUED IN ACCORDANCE WITH AND GOVERNED BY THE LAWS OF THE STATE OF LOUISIANA.</p> <p>27. COMPLIANCE WITH CIVIL RIGHTS LAWS.</p> <p>BY SUBMITTING AND SIGNING THIS BID, BIDDER AGREES TO ABIDE BY THE REQUIREMENTS OF THE FOLLOWING AS APPLICABLE: TITLE VI AND VII OF THE CIVIL RIGHTS ACT OF 1964, AS AMENDED BY THE EQUAL OPPORTUNITY ACT OF 1972, FEDERAL EXECUTIVE ORDER 11246, FEDERAL REHABILITATION ACT OF 1973, AS AMENDED, THE VETERAN'S READJUSTMENT ASSISTANCE ACT OF 1974, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, THE AGE ACT OF 1975, AND BIDDER AGREES TO ABIDE BY THE REQUIREMENTS OF THE AMERICANS WITH DISABILITIES ACT OF 1990. BIDDER AGREES NOT TO DISCRIMINATE IN ITS EMPLOYMENT PRACTICES, AND WILL RENDER SERVICES UNDER ANY CONTRACT ENTERED INTO AS A RESULT OF THIS SOLICITATION WITHOUT REGARD TO RACE, COLOR, RELIGION, SEXUAL ORIENTATION, NATIONAL ORIGIN, VETERAN STATUS, POLITICAL AFFILIATION, OR DISABILITIES. ANY ACT OF DISCRIMINATION COMMITTED BY BIDDER, OR FAILURE TO COMPLY WITH THESE STATUTORY OBLIGATIONS WHEN APPLICABLE, SHALL BE GROUNDS FOR TERMINATION OF ANY CONTRACT ENTERED INTO AS A RESULT OF THIS SOLICITATION.</p> <p>28. SPECIAL ACCOMMODATION.</p> <p>ANY "QUALIFIED INDIVIDUAL WITH A DISABILITY" AS DEFINED BY THE AMERICANS WITH DISABILITIES ACT WHO HAS SUBMITTED A BID AND DESIRES TO ATTEND THE BID OPENING, MUST NOTIFY THIS OFFICE IN WRITING NOT LATER THAN SEVEN DAYS PRIOR TO THE BID OPENING DATE OF THEIR NEED FOR SPECIAL ACCOMMODATIONS. IF THE REQUEST CANNOT BE REASONABLY PROVIDED, THE INDIVIDUAL WILL BE INFORMED PRIOR TO THE BID OPENING.</p> <p>29. INDEMNITY.</p> <p>CONTRACTOR AGREES, UPON RECEIPT OF WRITTEN NOTICE OF A CLAIM OR ACTION, TO DEFEND THE CLAIM OR ACTION, OR TAKE OTHER APPROPRIATE MEASURE, TO INDEMNIFY, AND HOLD HARMLESS, THE STATE, ITS OFFICERS, ITS AGENTS AND ITS EMPLOYEES FROM AND AGAINST ALL CLAIMS AND ACTIONS FOR BODILY INJURY, DEATH OR PROPERTY DAMAGES CAUSED BY THE FAULT OF THE CONTRACTOR, ITS OFFICERS, ITS AGENTS, OR ITS EMPLOYEES. CONTRACTOR IS OBLIGATED TO INDEMNIFY ONLY TO THE EXTENT OF THE FAULT OF THE CONTRACTOR, ITS OFFICERS, ITS AGENTS, OR ITS EMPLOYEES. HOWEVER, THE CONTRACTOR SHALL HAVE NO OBLIGATION AS SET FORTH ABOVE WITH RESPECT TO ANY CLAIM OR ACTION FROM BODILY INJURY, DEATH OR PROPERTY DAMAGES ARISING OUT OF THE FAULT OF THE STATE, ITS OFFICERS, ITS AGENTS OR ITS EMPLOYEES.</p> <p>30. SIGNATURE AUTHORITY.</p> <p>IN ACCORDANCE WITH L.R.S. 39:1594 (ACT 121), THE PERSON SIGNING THE BID MUST BE:</p> <ol style="list-style-type: none"> <li>1. A CURRENT CORPORATE OFFICER, PARTNERSHIP MEMBER OR OTHER INDIVIDUAL SPECIFICALLY AUTHORIZED TO SUBMIT A BID AS REFLECTED IN THE APPROPRIATE RECORDS ON FILE WITH THE SECRETARY OF STATE; OR</li> <li>2. AN INDIVIDUAL AUTHORIZED TO BIND THE VENDOR AS REFLECTED BY A CORPORATE RESOLUTION, CERTIFICATE OR AFFIDAVIT; OR</li> <li>3. OTHER DOCUMENTS INDICATING AUTHORITY WHICH ARE ACCEPTABLE TO THE PUBLIC ENTITY.</li> </ol>			

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<p>1 BID DELIVERY INSTRUCTIONS FOR STATE PURCHASING:</p> <p>BIDDERS ARE HEREBY ADVISED THAT THE U.S. POSTAL SERVICE DOES NOT MAKE DELIVERIES TO OUR PHYSICAL LOCATION.</p> <p>BIDS MAY BE MAILED THROUGH THE U.S. POSTAL SERVICE TO OUR BOX AT: OFFICE OF STATE PURCHASING P O BOX 94095 BATON ROUGE LA 70804-9095</p> <p>BIDS MAY BE DELIVERED BY HAND OR COURIER SERVICE TO OUR PHYSICAL LOCATION AS FOLLOWS:</p> <p>OFFICE OF STATE PURCHASING CLAIBORNE BUILDING, SUITE 2-160 1201 NORTH THIRD STREET BATON ROUGE, LA 70802</p> <p>BIDDER IS SOLELY RESPONSIBLE FOR ENSURING THAT ITS COURIER SERVICE PROVIDER MAKES INSIDE DELIVERIES TO OUR PHYSICAL LOCATION. THE OFFICE OF STATE PURCHASING IS NOT RESPONSIBLE FOR ANY DELAYS CAUSED BY THE BIDDER'S CHOSEN MEANS OF BID DELIVERY.</p> <p>BIDDER IS SOLELY RESPONSIBLE FOR THE TIMELY DELIVERY OF ITS BID. FAILURE TO MEET THE BID OPENING DATE &amp; TIME SHALL RESULT IN REJECTION OF THE BID.</p> <p>***** PUBLICIZING AWARDS. IN ACCORDANCE WITH L.A.C.34:I.535, UNSUCCESSFUL BIDDERS WILL BE NOTIFIED OF THE AWARD PROVIDED THAT THEY SUBMIT WITH THEIR BID A SELF-ADDRESSED STAMPED ENVELOPE REQUESTING THIS INFORMATION. *****</p> <p><b>**ATTENTION:**</b></p> <p>RECEIPT OF A SOLICITATION OR AWARD CANNOT BE RELIED UPON AS AN ASSURANCE OF RECEIVING FUTURE SOLICITATIONS. IN ORDER TO RECEIVE FUTURE SOLICITATIONS/AWARDS FROM THIS OFFICE, YOU MUST ENROLL IN THE PROPER CATEGORY ON LAPAC AT THE FOLLOWING WEB SITE: <a href="http://wwwprd.doa.louisiana.gov/osp/lapac/pubmain.asp">HTTP://WWWPRD.DOA.LOUISIANA.GOV/OSP/LAPAC/PUBMAIN.ASP</a> ENROLLMENT IN LAPAC IS FREE AND PROVIDES EMAIL NOTIFICATION OF BID OPPORTUNITIES BASED UPON COMMODITIES THAT YOU SELECT.</p> <p>2 TERMS AND CONDITIONS. THIS SOLICITATION CONTAINS ALL TERMS AND CONDITIONS WITH RESPECT TO THE COMMODITIES HEREIN. ANY VENDOR CONTRACTS, FORMS, TERMS OR OTHER MATERIALS SUBMITTED WITH BID MAY CAUSE BID TO BE REJECTED.</p> <p>3 VENDOR'S FORMS. THE PURCHASE/RELEASE ORDER IS THE ONLY BINDING DOCUMENT TO BE ISSUED AGAINST THIS CONTRACT. SIGNING OF VENDOR'S FORMS IS NOT ALLOWED.</p>			

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<p>4 SUBSTITUTES. ONLY BRANDS AND NUMBERS STATED IN THE AWARD ARE APPROVED FOR DELIVERY UNDER THIS CONTRACT AND ANY SUBSTITUTION MUST RECEIVE PRIOR WRITTEN APPROVAL OF THE DIRECTOR OF STATE PURCHASING OR DESIGNEE.</p> <p>5 COMPLIANCE WITH CIVIL RIGHTS LAWS. BY SUBMITTING AND SIGNING THIS SOLICITATION, THE BIDDER AGREES TO ABIDE BY THE REQUIREMENTS OF THE FOLLOWING AS APPLICABLE: TITLE VI AND TITLE VII OF THE CIVIL RIGHTS ACT OF 1964, AS AMENDED BY THE EQUAL OPPORTUNITY ACT OF 1972, FEDERAL EXECUTIVE ORDER 11246, THE FEDERAL REHABILITATION ACT OF 1973, AS AMENDED, THE VIETNAM ERA VETERAN'S READJUSTMENT ASSISTANCE ACT OF 1974, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, THE AGE ACT OF 1975, AND BIDDER AGREES TO ABIDE BY THE REQUIREMENTS OF THE AMERICANS WITH DISABILITIES ACT OF 1990. BIDDER AGREES NOT TO DISCRIMINATE IN ITS EMPLOYMENT PRACTICES, AND WILL RENDER SERVICES UNDER ANY CONTRACT ENTERED INTO AS A RESULT OF THIS SOLICITATION, WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, SEXUAL ORIENTATION, NATIONAL ORIGIN, VETERAN STATUS, POLITICAL AFFILIATION, OR DISABILITIES. ANY ACT OF DISCRIMINATION COMMITTED BY BIDDER, OR FAILURE TO COMPLY WITH THESE STATUTORY OBLIGATIONS WHEN APPLICABLE, SHALL BE GROUNDS FOR TERMINATION OF ANY CONTRACT ENTERED INTO AS A RESULT OF THIS SOLICITATION.</p> <p>6 PREFERENCE. IN ACCORDANCE WITH LOUISIANA REVISED STATUTES 39:1595, A PREFERENCE MAY BE ALLOWED FOR PRODUCTS MANUFACTURED, PRODUCED, GROWN, OR ASSEMBLED IN LOUISIANA OF EQUAL QUALITY.</p> <p>DO YOU CLAIM THIS PREFERENCE? YES_____</p> <p>SPECIFY LINE NUMBER(S) : _____</p> <p>_____</p> <p>SPECIFY LOCATION WITHIN LOUISIANA WHERE THIS PRODUCT IS MANUFACTURED, PRODUCED, GROWN OR ASSEMBLED: _____</p> <p>_____</p> <p>(NOTE: IF MORE SPACE IS REQUIRED, INCLUDE ON SEPARATE SHEET.)</p> <p>DO YOU HAVE A LOUISIANA BUSINESS WORKFORCE? YES_____ NO_____</p> <p>IF SO, DO YOU CERTIFY THAT AT LEAST FIFTY PERCENT (50%) OF YOUR LOUISIANA BUSINESS WORKFORCE IS COMPRISED OF LOUISIANA RESIDENTS?</p> <p>YES_____ NO_____</p> <p>FAILURE TO SPECIFY ABOVE INFORMATION MAY CAUSE ELIMINATION FROM PREFERENCES. PREFERENCES SHALL NOT APPLY TO SERVICE CONTRACTS.</p> <p>7 CANCELLATION</p> <p>THE STATE OF LOUISIANA RESERVES THE RIGHT TO CANCEL THIS CONTRACT WITH THIRTY (30) DAYS WRITTEN NOTICE.</p>			

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CERTIFICATION OF NO SUSPENSION OR DEBARMENT. BY SIGNING AND SUBMITTING ANY BID FOR \$100,000 OR MORE, THE BIDDER CERTIFIES THAT THEIR COMPANY, ANY SUBCONTRACTORS, OR PRINCIPALS ARE NOT SUSPENDED OR DEBARRED BY THE GENERAL SERVICES ADMINISTRATION (GSA) IN ACCORDANCE WITH THE REQUIREMENTS IN OMB CIRCULAR A-133.

A LIST OF PARTIES WHO HAVE BEEN SUSPENDED OR DEBARRED CAN BE VIEWED VIA THE INTERNET AT WWW.EPLS.GOV

9

LABORATORY REQUIREMENTS:

- ALL PACKAGES ARE TO BE INSIDE DELIVERY TO THE RECEIVING AREA OF THE LABORATORY.
- IF PRODUCT(S) DELIVERED REQUIRES REFRIGERATION, THE SHIPPED PACKAGE MUST BE CLEARLY MARKED IN A VISIBLE AREA ON THE OUTSIDE OF THE PACKAGE(S).
- VENDOR MUST MAINTAIN AN ADEQUATE SUPPLY OF ALL ITEMS IN ORDER TO MEET SPECIFIED DELIVERIES.
- THE AGENCY WILL RETURN SHIPMENTS AT THE VENDOR'S EXPENSE IF NOT SHIPPED AS STATED IN THE PURCHASE ORDER.
- IF APPLICABLE, APPROPRIATE MSDS SHEETS MUST BE PROVIDED AT THE TIME OF DELIVERY.
- VENDOR MUST SUPPLY TECHNICAL DATA SHEET DESCRIBING THE COMPANY'S QUALITY CONTROL.
- THE ABOVE QUANTITIES ARE ESTIMATED TO BE THE AMOUNT NEEDED. IN THE EVENT A GREATER OR LESSER AMOUNT IS NEEDED, THE RIGHT IS RESERVED BY THE STATE OF LOUISIANA TO INCREASE OR DECREASE THE AMOUNT AT THE UNIT PRICE STATED IN THE BID.
- AT THE OPTION OF THE STATE OF LOUISIANA AND ACCEPTANCE BY THE VENDOR, THIS CONTRACT MAY BE EXTENDED TO TWO ADDITIONAL TWELVE MONTH PERIODS AT THE SAME PRICE, TERMS AND CONDITIONS. CONTRACT NOT TO EXCEED THIRTY-SIX MONTHS.

10

PUBLICIZING AWARDS. IN ACCORDANCE WITH L.A.C. 34: I.535, UNSUCCESSFUL BIDDERS WILL BE NOTIFIED OF THE AWARD PROVIDED THAT THEY SUBMIT A SELF-ADDRESSED STAMPED ENVELOPE REQUESTING THIS INFORMATION.

11

IT SHALL BE DISTINCTLY AGREED AND UNDERSTOOD THAT THE PRICE QUOTED MUST BE A FIRM PRICE, AND NOT BE SUBJECT TO CHANGE AT TIME OF SHIPMENT

12

FREIGHT AND/OR TRANSPORTATION CHARGES MUST BE INCLUDED IN THE UNIT PRICE OF EACH ITEM AND NOT ADDED TO THE BID AS A SEPARATE ITEM. FAILURE TO DO SO MAY RESULT IN REJECTION OF YOUR BID.

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QUESTIONNAIRE: (TO BE COMPLETED BY BIDDER)

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YOUR NORMAL HOURS OF OPERATION: \_\_\_\_\_ TIME ZONE: \_\_\_\_\_

ARE YOU WILLING TO FURNISH SUPPLIES/SERVICES OUTSIDE OF YOUR NORMAL HOURS OF OPERATION? \_\_\_\_\_

IF YES, WILL CONTRACT PRICES APPLY? \_\_\_\_\_

IF NOT, EXPLAIN: \_\_\_\_\_

IF YOUR FACILITY IS RENDERED INOPERABLE, DO YOU HAVE SOURCES FROM WHICH SUPPLIES/SERVICES CAN STILL BE PROVIDED? \_\_\_\_\_

IF THE ANSWER IS YES, STATE THE LOCATION OF THE FACILITY(IES) FROM WHICH SUPPLIES/SERVICES WILL BE PROVIDED: \_\_\_\_\_

EMERGENCY CONTACT INFORMATION:

NAME: \_\_\_\_\_ PHONE # \_\_\_\_\_

BUSINESS E-MAIL: \_\_\_\_\_

ALTERNATE NUMBERS OR EMAIL ADDRESSES: \_\_\_\_\_

- 14 IF BIDDING OTHER THAN SPECIFIED, SUFFICIENT INFORMATION SHOULD BE ENCLOSED WITH THE BID IN ORDER TO DETERMINE QUALITY, SUITABILITY, AND COMPLIANCE WITH THE SPECIFICATIONS.

FAILURE TO COMPLY WITH THIS REQUEST MAY ELIMINATE YOUR BID FROM CONSIDERATION.

- 15 SAMPLE(S) MAY BE REQUIRED. WHEN REQUESTED, SAMPLES MUST BE FURNISHED AT VENDOR'S EXPENSE, AND RECEIVED NOT LATER THAN 10 DAYS AFTER REQUEST. PACKAGES SHOULD BE CLEARLY LABELED WITH THE FILE NUMBER. EACH INDIVIDUAL SAMPLE WITHIN THE PACKAGE MUST BE CLEARLY LABELED WITH BIDDER'S NAME, MANUFACTURER'S BRAND NAME AND NUMBER, FILE NUMBER AND ITEM REFERENCE. SUBMIT ONLY ONE BID PROPOSAL'S SAMPLES PER BOX. SAMPLES OF SUCCESSFUL BIDDER WILL BE RETAINED AT THE PURCHASING OFFICE OR THE USING AGENCY FOR THE PURPOSE OF RECEIVING MERCHANDISE. ANY PART OF MERCHANDISE RECEIVED THAT DOES NOT MEET THE QUALITY STANDARDS AND CONSTRUCTION OF THE SAMPLE WILL BE REJECTED AND RETURNED AT VENDOR'S EXPENSE.

ANY OTHER SAMPLES RECEIVED, IF NOT DESTROYED IN TESTING, MAY BE RETURNED AT THE BIDDER'S EXPENSE. REQUEST FOR RETURN, SHIPPING AUTHORIZATION, AND SUFFICIENT RETURN POSTAGE MUST BE RECEIVED NO LATER THAN 10 DAYS AFTER RECEIPT OF SAMPLES, OR COMMODITIES SHALL BE DISPOSED OF BY THE STATE OF LOUISIANA.

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AWARD TO BE MADE ON AN ALL-OR-NONE BASIS.

17

SCOPE OF CONTRACT  
  
 SUBMITTAL OF ANY TERMS AND CONDITIONS CONTRARY TO THOSE OF THE STATE OF LOUISIANA MAY CAUSE YOUR BID TO BE REJECTED. BY SIGNING BELOW, TERMS AND CONDITIONS WHICH MAY BE INCLUDED IN YOUR BID ARE NULLIFIED, AND CONTRACTOR AGREES THAT THIS CONTRACT SHALL BE CONSTRUED IN ACCORDANCE WITH AND GOVERNED BY THE LAWS OF THE STATE OF LOUISIANA.  
  


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 BIDDER SIGNATURE

18

COMPENSATION INSURANCE, PUBLIC LIABILITY, AND PROPERTY DAMAGE INSURANCE, AS OUTLINED BELOW, ARE REQUIRED IN THIS BID.  
  
 CONTRACTOR'S LIABILITY INSURANCE:  
  
 PROOF OF INSURANCE SHOULD BE SUPPLIED WITH THE BID AND WILL BE REQUIRED BEFORE WORK CAN COMMENCE.  
  
 INSURANCE COVERAGE SPECIFIED BELOW SHALL BE FURNISHED WITH THE FOLLOWING MINIMUM LIMITS:  
  
 COMPENSATION INSURANCE: THE CONTRACTOR AND SUBCONTRACTORS SHALL TAKE AND MAINTAIN DURING THE LIFE OF THE CONTRACT WORKMAN'S COMPENSATION INSURANCE FOR ALL OF THEIR EMPLOYEES EMPLOYED AT THE SITE OF THE PROJECT. IN CASE ANY CLASS OF EMPLOYEES ENGAGED IN HAZARDOUS WORK UNDER THE WORKMAN'S COMPENSATION STATUTE, THE CONTRACTOR AND SUBCONTRACTOR SHALL PROVIDE EMPLOYER'S LIABILITY INSURANCE FOR THE PROTECTION OF THEIR EMPLOYEES NOT OTHERWISE PROTECTED.  
  
 PUBLIC LIABILITY AND PROPERTY DAMAGE INSURANCE: COMPREHENSIVE PUBLIC GENERAL LIABILITY INSURANCE, INCLUDING BUT NOT LIMITED TO BODILY INJURY, PROPERTY DAMAGE, CONTRACTUAL LIABILITY, PRODUCTS LIABILITY, COMPLETED OPERATIONS AND OWNER'S PROTECTIVE LIABILITY WITH COMBINED SINGLE LIMITS OF \$500,000 PER OCCURRENCE WITH A MINIMUM AGGREGATE OF \$1,000,000.  
  
 LICENSED AND NON-LICENSED MOTOR VEHICLES: THE CONTRACTOR SHALL TAKE OUT AND MAINTAIN DURING THE LIFE OF THE CONTRACT, AUTOMOBILE PUBLIC LIABILITY INSURANCE IN AN AMOUNT NOT LESS THAN COMBINED SINGLE LIMITS OF \$500,000 PER OCCURRENCE FOR BODILY INJURY/PROPERTY DAMAGE. IF ANY NON-LICENSED MOTOR VEHICLES ARE ENGAGED IN OPERATIONS WITHIN THE TERMS OF THE CONTRACT ON THE SITE OF THE WORK TO PERFORM THEREUNDER, SUCH INSURANCE SHALL COVER THE USE OF ALL SUCH MOTOR VEHICLES ENGAGED IN OPERATING WITHIN THE TERMS OF THE CONTRACT ON THE SITE OF THE WORK TO BE PERFORMED THEREUNDER, UNLESS SUCH COVERAGE IS INCLUDED IN THE INSURANCE SPECIFIED.

19

VENDOR MUST INSPECT JOB SITE TO VERIFY MEASUREMENTS AND/OR AMOUNT OF SUPPLIES NEEDED PRIOR TO BIDDING. IF VENDOR FINDS CONDITIONS THAT DISAGREE WITH THE PHYSICAL LAYOUT AS DESCRIBED IN THE BID, OR OTHER



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FEATURES OF THE SPECIFICATIONS THAT APPEAR TO BE IN ERROR, SAME SHALL BE BROUGHT TO THE ATTENTION OF THE OFFICE OF STATE PURCHASING PERSONNEL PRIOR TO BIDDING. FAILURE TO DO SO WILL BE INTERPRETED THAT BID IS AS SPECIFIED.

VENDOR MAY CONTACT JIM GILBERT AT (318) 221-0859 TO SCHEDULE AND APPOINTMENT.

\*\*\*\*NOTE: ONLY BIDDERS BIDDING OTHER THAN SPECIFIED BRAND WILL BE REQUIRED TO ATTEND A MANDATORY JOBSITE VISIT.

\*\*\* MANDATORY JOBSITE VISIT REQUIRED IF BIDDING OTHER BRAND \*\*\*

THIS SIGNED STATEMENT CERTIFIES THAT THE VENDOR NAMED BELOW HAS VISITED THE JOB SITE AND IS FAMILIAR WITH ALL CONDITIONS SURROUNDING FULFILLMENT OF THE SPECIFICATIONS FOR THIS PROJECT.

VENDOR'S COMPANY NAME

STATE AGENCY'S NAME

VENDOR'S SIGNATURE

AGENCY'S SIGNATURE

20 BEFORE THIS CONTRACT IS ACCEPTABLE AND COMPLETE, SUCCESSFUL BIDDER SHALL CLEAN UP AND REMOVE FROM THE PREMISES ALL DEBRIS RESULTING FROM HIS WORK, AND SHALL SEE TO IT THAT ALL THE ITEMS FURNISHED ARE LEFT IN GOOD ORDER, CLEAN AND PROPERLY INSTALLED.

21 ANY ORDERS RESULTING FROM THIS SOLICITATION WILL BE PAID WITH NEW FY FUNDS, IF APPROPRIATED BY THE LEGISLATURE. DELIVERY CANNOT BE MADE PRIOR TO JULY 1 AND YOUR BID PRICES MUST BE FIRM FOR ACCEPTANCE AND DELIVERY ACCORDINGLY.

22 THE ABOVE QUANTITIES ARE ESTIMATED TO BE THE AMOUNT NEEDED. IN THE EVENT A GREATER OR LESSER QUANTITY IS NEEDED, THE RIGHT IS RESERVED BY THE STATE OF LOUISIANA TO INCREASE OR DECREASE THE AMOUNT, AT THE UNIT PRICE STATED IN THE BID.

23 AT THE OPTION OF THE STATE OF LOUISIANA AND ACCEPTANCE BY THE CONTRACTOR, THIS CONTRACT MAY BE EXTENDED FOR TWO ADDITIONAL TWELVE (12) MONTH PERIODS AT THE SAME PRICE, TERMS AND CONDITIONS. TOTAL CONTRACT TIME MAY NOT EXCEED THIRTY-SIX (36) MONTHS.

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ADDITIONAL SPECIFICATIONS FOR LINE 1, 2, AND 3 ARE AS FOLLOWS:

SYNTHETIC PEPTIDE IMMUNOASSAY (EIA) FOR HIV1/2: AN ENZYME IMMUNOASSAY FOR THE DETECTION OF ANTIBODIES FOR HIV-1 AND HIV-2 IN HUMAN SERUM AND PLASMA. THE KIT MUST BE IN THE MICROTITER ASSAY FORMAT, (96) WELL FORMAT). THE KIT MUST INCLUDE SYNTHETIC PEPTIDE ENZYME IMMUNOASSAY FOR THE DETECTION OF THE ANTIBODY TO HIV1 AND HIV2. THE MICROTITER WELLS MUST BE COATED WITH A MIXTURE OF 4 PEPTIDES; ENV AND POL FOR SEQUENCES FOR HIV1 AND HIV2 ON 8 WELL STRIPS. MUST BE ABLE TO TEST SPECIMEN DILUTION OF 1:10. MUST BE AN FDA LICENSED RECOMBINANT PEPTIDE EIA FOR HIV1 AND HIV2. MUST INCLUDE ENOUGH COATED 8 WELL STRIPS, SPECIMEN DILUENT, HIV1 AND HIV2 POSITIVE AND NEGATIVE CONTROLS (MUST BE NEGATIVE FOR HBSAG AND HCV NON REACTIVE). PEROXIDATE CONJUGATE CONCENTRATE, PEROXIDASE CONJUGATE DILUENT, WASH SOLUTION, CHROMOGEN REAGENT, CHROMOGEN DILUENT, STOP SOLUTION AND 25 MICROTITER PLATE SEALERS TO PERFORM 480 TESTS AND A PRODUCT INSERT PER KIT. MUST BE ABLE TO PERFORM ASSAY ON THE EQUIPMENT SUPPLIED BY THE VENDOR (SEE SPECIAL CONDITION REFERRING TO EQUIPMENT). EACH KIT PERFORMS 480 TESTS. EACH KIT MUST HAVE AT LEAST 6 MONTH'S EXPIRATION DATE FROM SHIPPING DATE. VENDOR MUST PROVIDE KITS WITHIN 48 TO 72 HOURS AFTER ORDER HAS BEEN PLACED. THE SUCCESSFUL VENDOR MUST PROVIDE 2 INSTRUMENTS FOR SHREVEPORT REG LAB, THAT HAVE THE FOLLOWING COMPONENT ON THE SAME PLATFORM. SUPPLIED EQUIPMENT MUST BE COMPACT IN SIZE TO BE A TABLETOP EQUIPMENT. EQUIPMENT DIMENSIONS MUST NOT EXCEED 38"H X 45"W X 30"D. SUCCESSFUL VENDOR MUST PROVIDE:

A COMPUTER MODULE WITH NECESSARY SOFTWARE TO ANALYZE THE EIA RAW DATA, QUALITY CONTROL DATA AND KEEP REAGENT INFORMATION (KIT LOT #, EXPIRATION DATE AND QUALITY CONTROL VALUES OF CONTROLS, AND LEVY JENNINGS CHART). SUCCESSFUL VENDOR MUST TRAIN 4 DHH LABORATORY EMPLOYEES PRIOR TO RECEIVING THE EQUIPMENT AT THE PREMISES, INCLUDING TRANSPORTATION, LODGING AND BOARDING FROM LABORATORY TO VENDOR TRAINING SITE AT VENDOR'S EXPENSE.

INSTRUMENT SPECIFICATIONS:

MUST BE ABLE TO PROCESS AT LEAST 180 SAMPLES AT A TIME.

MUST BE ABLE TO DILUTE PATIENT SPECIMEN IN THE TUBE AND/OR IN THE 96 WELL MICROTITER PLATE.

MUST BE ABLE TO ADOPT TUBE VARYING IN SIZE FROM 10 MM TO 16 MM.

MUST BE ABLE TO DILUTE SAMPLE TO 1:10,000.

MUST BE ABLE TO CONTINUOUSLY LOAD THE PIPETTER PORTION OF THE EQUIPMENT WITH SPECIMEN.

MUST HAVE BUILT IN BARCODE READER FOR POSITIVE SAMPLE AND REAGENT IDENTIFICATION.

MUST INCLUDE COMPUTER SYSTEM AND SOFTWARE FOR DATA ANALYSIS.

MUST HAVE AN ESTIMATED THROUGHPUT OF PROCESSING 500 SPECIMENS PER 8-HOUR SHIFT.

MUST BE ABLE TO RUN UP TO 12 ASSAYS PER PLATE.

MUST BE ABLE TO INCUBATE ASSAY AT ROOM TEMPERATURE AND AT 37 DEGREES C.

ELECTRICAL NEED OF THE EQUIPMENT BE 110/260V, 47-63 HX AND 500 FZ POWER CONSUMPTION.

COMPUTER INTERFACE SPECIFICATIONS:

MUST HAVE ABILITY TO CONNECT 2 EQUIPMENT TO A LAN AND INTERFACE TO THE

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<p>           FACILITIES LIMS PROVIDER.            MUST HAVE BI DIRECTIONAL INTERFACE WITH ASTM OR ASCII FORMAT.            USER INTERFACE MUST BE WINDOWS 2000 OPERATING SYSTEM.            MUST BE ABLE TO TRACK REACTIVE RESULT OF THE SPECIMEN AND PERFORM            DUPLICATE ASSAY PRIOR TO CONFIRMATION.         </p> <p> <b>WASHER SPECIFICATIONS:</b>            MUST HAVE AN EIGHT CHANNEL MANIFOLD.            MUST BE ABLE TO USE FLAT U OR V SHAPED MICROTITER PLATE BOTTOM SHAPES.            MUST HAVE MICROTITER PLATE OR STRIP WASHER MODE.            MUST HAVE A VARIABLE WASH CYCLE OF 1 TO 9.            MUST HAVE PLATE SOAK TIME FROM 0 TO 999 SEC.            MUST HAVE WASH BUFFER WITH LEVEL SENSORS OF 2 X 2L AND 2 X 1L.            MUST HAVE WASH CAPACITY WITH LEVEL SENSORS OF 1 X 10L.         </p> <p> <b>READER SPECIFICATIONS:</b>            MUST HAVE AN 8 CHANNEL READ HEAD.            READ TIME FOR A FULL PLATE MUST NOT BE GREATER THAN 15 SECONDS.            MUST HAVE A HALOGEN LIGHT SOURCE.            MUST HAVE OPTICAL DENSITY READING RANGE UP TO 3.5 O.D.            MUST BE EQUIPPED WITH 405, 450, 492, 550, 620, AND 690 MM FILTER            WHEELS.            MUST HAVE AN OVER RANGE FILTER. MUST BE IN THE LINEARITY RANGE OF            0 - 2.0 O.D. TO 1%, AND PRECISION OF 0 - 2.0 O.D. TO 2.5%.         </p> <p> <b>ADDITIONAL SPECIFICATIONS FOR LINE 4 IS AS FOLLOWS:</b>            IMMUNOASSAY (EIA) FOR THE DETECTION OF ANTIBODIES TO HIV-2.            AN ENZYME IMMUNOASSAY FOR DETECTION OF SPECIFIC ANTIBODIES FOR HIV-2            IN HUMAN SERUM AND PLASMA. THE WELLS OF THE MICROTITER PLATE ARE TO            BE COATED WITH A VIRAL LYSATE DERIVED FROM HIV-2 VIRUS. MUST BE ABLE            TO TEST SPECIMEN DILUTION OF 1:10. MUST BE AN FDA LICENSED HIV2            ASSAY. MUST INCLUDE ENOUGH COATED 8 WELLS STRIPS, SPECIMEN DILUENT,            HIV2 POSITIVE AND NEGATIVE CONTROLS (MUST BE NEGATIVE FOR HBSAG AND            HCV NON REACTIVE), PEROXIDASE CONJUGATE CONCENTRATE, PEROXIDASE            CONJUGATE DILUTENT, WASH SOLUTION, CHROMOGEN REAGENT, CHROMOGEN            DILUTENT, STOP SOLUTION AND 25 MICROTITER PLATE SEALERS TO PERFORM 480            TESTS AND A PRODUCT INSERT PER KIT. MUST BE ABLE TO PERFORM ASSAY ON            THE EQUIPMENT SUPPLIED BY THE VENDOR (SEE SPECIAL CONDITION REFERRING            TO EQUIPMENT). EACH KIT PERFORMS 480 TESTS. EACH KIT MUST HAVE AT            LEAST 6 MONTH'S EXPIRATION DATE FROM SHIPPING DATE. VENDOR MUST            PROVIDE KITS WITHIN 48 TO 72 HOURS AFTER ORDER HAS BEEN PLACED. ASSAY            MUST BE CAPABLE OF BEING PERFORMED USING THE SAME EQUIPMENT AS THE            HIV1/2 PEPTIDE ASSAY.         </p> <p>           SUCCESSFUL VENDOR IS REPOSNSIBLE FOR MAINTENANCE OF EQUIPMENT. SHOULD            EQUIPMENT FAIL TO PERFORM, SERVICE ENGINEER MUST BE DISPATCHED AT            VENDOR'S EXPENSE WITHIN 24 WORKING HOURS.         </p>			

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00001	<p>UNLESS SPECIFIED ELSEWHERE SHIP TO: DHH-OFFICE OF PUBLIC HEALTH SHREVEPORT REGIONAL LABORATORY 533 VINE STREET SHREVEPORT , LA 71101</p> <p>COMMODITY CODE: 193-60-000000</p> <p>SYNTHETIC PEPTIDE IMMUNOASSAY (EIA) FOR HIV 1/2, 480 TEST KITS</p> <p>DELIVERY: DO NOT SHIP - TO BE CALLED IN AS NEEDED FROM 07/01/09 TO 06/30/10.</p> <p>BIO RAD LABORATORIES CAT #32588 OR APPROVED EQUAL</p> <p>SYNTHETIC PEPTIDE IMMUNOASSAY (EIA) FOR HIV 1/2: AN ENZYME IMMUNOASSAY FOR THE DETECTION OF ANTIBODIES FOR HIV-1 AND HIV-2 IN HUMAN SERUM AND PLASMA. THE KIT MUST BE IN THE MICROTITER ASSAY FORMAT, (96)WELL FORMAT. THE KIT MUST INCLUDE SYNTHETIC PEPTIDE ENZYME IMMUNOASSAY FOR THE DETECTION OF THE ANTIBODY HIV-1 AND HIV-2. THE MICROTITER WELLS MUST BE COATED WITH A MIXTURE OF 4 PEPTIDES; ENV AND POL FOR SPECIMEN DILUTION OF 1:10. KIT MUST BE FDA LICENSED RECOMBINANT PEPTIDE EIA FOR HIV-1 &amp; HIV-2. KIT MUST INCLUDE ENOUGH COATED 8 WELL STRIPS, SPECIMEN DILUENT, HIV-1 &amp; HIV-2 POSITIVE &amp; NEGATIVE CONTROLS (MUST BE NEGATIVE FOR HBSAGG &amp; HCV NON REACTIVE) KIT MUST INCLUDE PEROXIDATE CONJUGATE DILUENT, WASH SOLUTION, CHROMAGEN REAGENT, CHROMAGEN DILUENT, STOP SOLUTION &amp; 25 MICROTITER PLATER SEALERS TO PERFORM 480 TESTS &amp; A PRODUCT INSERT PER KIT. EACH KIT PERFORMS 480 TESTS. EACH KIT MUST HAVE AT LEAST 6 MONTH EXPIRATION DATE FROM SHIPPPING DATE. VENDOR MUST PROVIDE KITS WITHIN 48 TO 72 HOURS AFTER ORDER HAS BEEN PLACED.</p> <p>MUST HAVE AT LEAST A 3 MONTH EXPIRATION DATE FROM DATE OF RECEIPT BY AGENCY</p>	60	KIT		

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00002	<p>STATE QTY. PER KIT: _____</p> <p>SPECIFY BRAND (&amp; NUMBER IF APPLICABLE)</p> <p>_____</p> <p>COMMODITY CODE: 193-60-000000</p> <p>IMMUNOASSAY (EIA) FOR THE DETECTION OF ANTIBODIES TO HIV-2</p> <p>DELIVERY: DO NOT SHIP - TO BE CALLED IN AS NEEDED FROM 07/01/09 TO 06/30/10.</p> <p>BIO RAD LABORATORIES CAT #32536 OR APPROVED EQUAL</p> <p>SYNTHETIC PEPTIDE IMMUNOASSAY (EIA) FOR HIV-2: AN ENZYME IMMUNOASSAY FOR THE DETECTION OF ANTIBODIES FOR HIV-2 IN HUMAN SERUM &amp; PLASMA. THE WELLS OF THE MICROTITER PLATE ARE TO BE COATED WITH A VIRAL LYSATE DERIV FROM HIV-2 VIRUS. KIT MUST BE ABLE TO TEST SPECIMEN DILUTION 1:10. KIT MUST BE AN FDA LICENSED HIV-2 ASSAY. KIT MUST INCLUDE ENOUGH COATED 8 WELL STRIPS, SPECIMEN DILUENT, HIV-2 POSITIVE &amp; NEGATIVE CONTROLS (MUST BE NEGATIVE FOR HBSAG &amp; HCV NON REACTIVE), PEROXIDASE CONJUGATE CONCENTRATE, PEROXIDASE CONJUGATE DILUENT, WASH SOLUTION, CHROMAGEN REAGENT, CHROMAGEN DILUENT, STOP SOLUTION AND 25 MICROTITER PLATE SEALERS TO PERFORM 280 TESTS AND PRODUCT INSERT PER KIT. EACH KIT PERFORMS 480 TESTS. EACH KIT MUST HAVE AT LEAST A 6 MONTH EXPIRATION DATE FROM SHIPPING DATE. VENDOR MUST PROVIDE KITS WITHIN 48 TO 72 HOURS AFTER ORDER HAS BEEN PLACED. KIT MUST BE CAPABLE OF BEING PERFORMED USING THE SAME INSTRUMENTATION AS THE HIV 1/2 PEPTIDE ASSAY.</p> <p>MUST HAVE AT LEAST A 3 MONTH EXPIRATION DATE FROM DATE OF RECEIPT BY AGENCY</p> <p>STATE QTY. PER KIT: _____</p>	3	KIT	_____	_____

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00003	SPECIFY BRAND (& NUMBER IF APPLICABLE) _____ _____ COMMODITY CODE: 193-60-000000 HIV-1 FDA APPROVED WESTERN BLOT KIT FOR DETECTION OF HIV-1 ANTIBODY IN HUMAN SERUM OR PLASMA. NOTE: PRODUCT WITH THE LOWEST NUMBER OF POSITIVE RESULTS SEEN AS INDETERMINATE REACTION PATTERNS, USING CDC/ASTPHLD GRADING SYSTEM IS REQUIRED KIT INCLUDES: 40 STRIPS (2PKGS OF 20 STRIPS EACH) 1 NON-REACTIVE CONTROL 1 WEAKLY REACTIVE CONTROL 1 HIGH POSITIVE CONTROL 2 BOTTLES OF SPECIMEN DILUENT/WASH (100ML EACH) 1 BOTTLE OF GOAT ANTI-HUMAN ALKALINE PHOSPHATASE CONJUGATE 1 BOTTLE OF READY TO USE SUBSTRATE 8 DISPOSABLE REACTION TRAYS WITH LIDS DELIVERY: DO NOT SHIP - TO BE CALLED AS NEEDED FROM 07/01/09 TO 06/30/10. BIO RAD # 32508 OR APPROVED EQUAL MUST HAVE AT LEAST A 3 MONTH EXPIRATION DATE FROM DATE OF RECEIPT BY AGENCY STATE QTY. PER KIT: _____ SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	50	KIT	_____	_____
00004	COMMODITY CODE: 193-60-000000 AN IMMUNOASSAY (EIA) FOR THE DETECTION OF IGG ANTIBODIES SPECIFIC FOR TREPONEMA PALLIDUM (TP) IN HUMAN SERUM AND OR	80	KIT	_____	_____

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	PLASMA, PER ATTACHED SPECIAL CONDITIONS.  DELIVERY: DO NOT SHIP - TO BE CALLED IN AS NEEDED FROM 07/01/09 TO 06/30/10.  SYPHILIS 960 TEST KIT  BIO-RAD # 25030 OR APPROVED EQUAL  MUST HAVE AT LEAST A 3 MONTH EXPIRATION DATE FROM DATE OF RECEIPT BY AGENCY  STATE QTY. PER KIT: _____  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____				
00005	COMMODITY CODE: 979-81-000000  RENTAL OF EVOLIS MICROPLATE PROCESSOR BIO-RAD #89700D OR APPROVED EQUAL  RENTAL PERIOD FROM 07/01/09 TO 06/30/10.  ADDRESS: DHH-OPH, SHREVEPORT REG. LAB 533 VINE STREET SHREVEPORT, LOUISIANA 71101  INSTRUMENT SPECIFICATIONS: RENTAL OF MICROPLATE EIA ANALYZER WITH NECESSARY SOFTWARE TO ANALYZE THE EIA RAW DATA, QUALITY CONTROL DATA, & STORE REAGENT INFORMATION (KIT LOT #, EXPIRATION DATE). SUPPLIED EQUIPMENT MUST BE COMPACT IN SIZE AND TABLETOP. EQUIPMENT DIMENSIONS MUST NOT EXCEED 38.0" X 45.2" X 30.4" (H X W X D). MUST BE ABLE TO PROCESS AT LEAST 180 SAMPLES AT ONE TIME. MUST BE ABLE TO DILUTE PATIENT SPECIMEN IN TUBE AND/OR IN 96 WELL MICROTITER PLATE. MUST BE ABLE TO ADAPT TUBE VARYING IN SIZE FROM 10MM TO 16MM. MUST HAVE BUILT IN BARCODE READER FOR POSITIVE SAMPLE & REAGENT IDENTIFICATION MUST INCLUDE COMPUTER SYSTEM & SOFTWARE	12	MO		

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	<p>FOR DATA ANALYSIS. MUST BE ABLE TO RUN MULTIPLE ASSAYS PER PLATE. MUST BE ABLE TO INCUBATE ASSAY AT TEMPERATURES RANGING FROM ROOM TEMPERATURE TO 37 DEGREES CENTIGRADE. MUST BE 110/260V WITH 47-63 HX AND 500FZ POWER CONSUMPTION.</p> <p>COMPUTER INTERFACE SPECIFICATIONS: MUST HAVE ABILITY TO CONNECT INSTRUMENT TO A LAN AND INTERFACE TO THE FACILITY'S LIMS PROVIDER. MUST HAVE BIDIRECTIONAL INTERFACE WITH B ASTM OR ASCII FORMAT. MUST BE WINDOWS OPERATING SYSTEM. MUST BE ABLE TO TRACK REACTIVE RESULT OF THE SPECIMEN AND PERFORM DUPLICATE ASSAY PRIOR TO CONFIRMATION.</p> <p>WASHER SPECIFICATIONS: MUST HAVE AN EIGHT CHANNEL MANIFOLD. MUST BE ABLE TO USE FLAT "U" OR "V" SHAPED MICROTITER PLATE BOTTOM. MUST HAVE DISPOSABLE TIPS TO PIPET SPECIMENS AND REAGENTS. MUST HAVE MICROTITER STRIP OR PLATE WASHER MODE. MUST HAVE A VARIABLE WASH CYCLE OF 1 TO 9. MUST HAVE PLATE SOAK TIME FROM 0-999 SECONDS. MUST HAVE WASH BUFFER WITH LEVEL SENSORS FOR 2 X 2L AND 2 X 1L. MUST HAVE WASTE CAPACITY WITH LEVEL SENSORS OF 1 X 10L</p> <p>READER SPECIFICATIONS: MUST HAVE AN 8 CHANNEL READ HEAD. MUST HAVE READ TIME OF FULL PLATE NOT GREATER THAN 15 SECONDS. MUST HAVE HALOGEN LIGHT SOURCE. MUST HAVE OPTICAL DENSITY READING RANGE UP TO 3.5 OD. MUST BE EQUIPPED WITH 405, 459, 492, 550, 620, AND 690 MM FILTER WHEELS.</p> <p>SPECIFY BRAND (&amp; NUMBER IF APPLICABLE)</p>				



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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00006	COMMODITY CODE: 979-81-000000  MAINTENANCE ON EQUIPMENT SUPPLIED FOR TESTING ON LINE 00005 PER SPECIFICATIONS  DELIVERY: DO NOT SHIP - MAINTENANCE PERIOD FROM 07/01/09 TO 06/30/10.  ADDRESS: DHH-OPH, SHREVEPORT REG. LAB 533 VINE STREET SHREVEPORT, LOUISIANA 71101  VENDOR SHALL PERFORM SERVICE AND REPLACE PARTS NECESSARY TO KEEP EQUIPMENT IN GOOD WORKING ORDER, EXCLUDING ITEMS SUBJECT TO NORMAL WEAR. FIELD SERVICE ENGINEER MUST BE EMPLOYEE OF VENDOR. NO THIRD PARTY SERVICE CONTRACTORS WILL BE ACCEPTED. FIELD SERVICE ENGINEER SHOULD LIVE IN LOUISIANA.  *** ALL ITEMS MUST BE COMPATIBLE ***  SPECIFY BRAND (& NUMBER IF APPLICABLE)  _____	12	MO	_____	_____
00007	COMMODITY CODE: 979-81-000000  RENTAL OF EVOLIS MICROPLATE PROCESSOR BIO-RAD #89700D OR APPROVED EQUAL  DELIVERY: DO NOT SHIP - RENTAL PERIOD FROM 07/01/09 TO 06/30/10.  ADDRESS: DHH-OPH, SHREVEPORT REG. LAB 533 VINE STREET SHREVEPORT, LOUISIANA 71101  INSTRUMENT SPECIFICATIONS: RENTAL OF MICROPLATE EIA ANALYZER WITH NECESSARY SOFTWARE TO ANALYZE THE EIA RAW DATA, QUALITY CONTROL DATA, & STORE REAGENT INFORMATION (KIT LOT #, EXPIRATION DATE). SUPPLIED EQUIPMENT MUST BE COMPACT IN SIZE AND TABLETOP. EQUIPMENT DIMENSIONS	12	MO	_____	_____

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	<p>MUST NOT EXCEED 38.0" X 45.2" X 30.4" (H X W X D).</p> <p>MUST BE ABLE TO PROCESS AT LEAST 180 SAMPLES AT ONE TIME.</p> <p>MUST BE ABLE TO DILUTE PATIENT SPECIMEN IN TUBE AND/OR IN 96 WELL MICROTITER PLATE.</p> <p>MUST BE ABLE TO ADAPT TUBE VARYING IN SIZE FROM 10MM TO 16MM.</p> <p>MUST HAVE BUILT IN BARCODE READER FOR POSITIVE SAMPLE &amp; REAGENT IDENTIFICATION</p> <p>MUST INCLUDE COMPUTER SYSTEM &amp; SOFTWARE FOR DATA ANALYSIS.</p> <p>MUST BE ABLE TO RUN MULTIPLE ASSAYS PER PLATE.</p> <p>MUST BE ABLE TO INCUBATE ASSAY AT TEMPERATURES RANGING FROM ROOM TEMPERATURE TO 37 DEGREES CENTIGRADE.</p> <p>MUST BE 110/260V WITH 47-63 HX AND 500FZ POWER CONSUMPTION.</p> <p>COMPUTER INTERFACE SPECIFICATIONS:</p> <p>MUST HAVE ABILITY TO CONNECT INSTRUMENT TO A LAN AND INTERFACE TO THE FACILITY'S LIMS PROVIDER.</p> <p>MUST HAVE BIDIRECTIONAL INTERFACE WITH B ASTM OR ASCII FORMAT.</p> <p>MUST BE WINDOWS OPERATING SYSTEM.</p> <p>MUST BE ABLE TO TRACK REACTIVE RESULT OF THE SPECIMEN AND PERFORM DUPLICATE ASSAY PRIOR TO CONFIRMATION.</p> <p>WASHER SPECIFICATIONS:</p> <p>MUST HAVE AN EIGHT CHANNEL MANIFOLD.</p> <p>MUST BE ABLE TO USE FLAT "U" OR "V" SHAPED MICROTITER PLATE BOTTOM.</p> <p>MUST HAVE DISPOSABLE TIPS TO PIPET SPECIMENS AND REAGENTS.</p> <p>MUST HAVE MICROTITER STRIP OR PLATE WASHER MODE.</p> <p>MUST HAVE A VARIABLE WASH CYCLE OF 1 TO 9.</p> <p>MUST HAVE PLATE SOAK TIME FROM 0-999 SECONDS.</p> <p>MUST HAVE WASH BUFFER WITH LEVEL SENSORS FOR 2 X 2L AND 2 X 1L.</p> <p>MUST HAVE WASTE CAPACITY WITH LEVEL SENSORS OF 1 X 10L.</p> <p>READER SPECIFICATIONS:</p> <p>MUST HAVE AN 8 CHANNEL READ HEAD.</p> <p>MUST HAVE READ TIME OF FULL PLATE NOT GREATER THAN 15 SECONDS.</p>				

PRICE SHEET		INVITATION TO BID			
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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00008	<p>MUST HAVE HALOGEN LIGHT SOURCE. MUST HAVE OPTICAL DENSITY READING RANGE UP TO 3.5 OD. MUST BE EQUIPPED WITH 405, 459, 492, 550, 620 AND 690 MM FILTER WHEELS.</p> <p>SPECIFY BRAND (&amp; NUMBER IF APPLICABLE)</p> <hr/> <p>COMMODITY CODE: 979-81-000000</p> <p>MAINTENANCE ON EQUIPMENT SUPPLIED FOR TESTING ON LINE 00007 PER SPECIFICATIONS</p> <p>DELIVERY: DO NOT SHIP - MAINTENANCE PERIOD FROM 07/01/09 TO 06/30/10.</p> <p>ADDRESS: DHH-OPH, SHREVEPORT REG. LAB 533 VINE STREET SHREVEPORT, LOUISIANA 71101</p> <p>VENDOR SHALL PERFORM SERVICE AND REPLACE PARTS NECESSARY TO KEEP EQUIPMENT IN GOOD WORKING ORDER, EXCLUDING ITEMS SUBJECT TO NORMAL WEAR. FIELD SERVICE ENGINEER MUST BE EMPLOYEE OF VENDOR. NO THIRD PARTY SERVICE CONTRACTORS WILL BE ACCEPTED. FIELD SERVICE ENGINEER SHOULD LIVE IN LOUISIANA.</p> <p>*** ALL ITEMS MUST BE COMPATIBLE ***</p> <p>SPECIFY BRAND (&amp; NUMBER IF APPLICABLE)</p> <hr/>	12	MO		
00009	<p>COMMODITY CODE: 175-74-000000</p> <p>LAMP, 13.8 VOLTS 30 WATTS, EVOLIS</p> <p>BIO-RAD #80604 OR APPROVED EQUAL</p> <p>DO NOT SHIP. TO BE CALLED IN AS NEEDED FROM 07/01/09 TO 06/30/10.</p>	4	EACH		

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	SPECIFY BRAND (& NUMBER IF APPLICABLE) _____				
00010	COMMODITY CODE: 175-74-000000  TIPS, CONDUCTIVE, 300UL, 18/BOX/CASE  BIO-RAD CAT #89611 OR APPROVED EQUAL  DO NOT SHIP. TO BE CALLED IN AS NEEDED.  STATE QTY. PER CASE: _____  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	10	CASE	_____	_____
00011	COMMODITY CODE: 175-74-000000  TIPS, CONDUCTIVE, 1100UL, 10/BOX/CASE  BIO-RAD CAT #89612 OR APPROVED EQUAL.  DO NOT SHIP. TO BE CALLED IN AS NEEDED.  STATE QTY. PER CASE: _____  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	5	CASE	_____	_____
00012	COMMODITY CODE: 175-74-000000  MICROCIDE CLEANING CONCENTRATE  BIO-RAD CAT #25099 OR APPROVED EQUAL  DO NOT SHIP. TO BE CALLED IN AS NEEDED.	4	EACH	_____	_____

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00013	SPECIFY BRAND (& NUMBER IF APPLICABLE) _____ COMMODITY CODE: 175-74-000000 BARCODE LABEL KIT, GS HIV 1/2 PLUS O BIO-RAD CAT #25064 OR APPROVED EQUAL MUST BE COMPATIBLE WITH INSTRUMENTATION DO NOT SHIP. TO BE CALLED IN AS NEEDED. SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	1	EACH	_____	_____
00014	COMMODITY CODE: 175-74-000000 BARCODE LABEL KIT, CAPTIA SYPHILIS BIO-RAD CAT #31134 OR APPROVED EQUAL MUST BE COMPATIBLE WITH INSTRUMENTATION DO NOT SHIP. TO BE CALLED IN AS NEEDED. SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	1	EACH	_____	_____
00015	COMMODITY CODE: 175-74-000000 BARCODE LABEL KIT, HIV-2 BIO-RAD CAT #31108 OR APPROVED EQUAL MUST BE COMPATIBLE WITH INSTRUMENTATION DO NOT SHIP. TO BE CALLED IN AS NEEDED.	1	EACH	_____	_____

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00016	SPECIFY BRAND (& NUMBER IF APPLICABLE) _____ _____ COMMODITY CODE: 175-74-000000 VERIFICATION PLATE ASSAY READER BIO-RAD CAT #89690R OR APPROVED EQUAL MUST BE COMPATIBLE WITH INSTRUMENTATION DO NOT SHIP. TO BE CALLED IN AS NEEDED. SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	1	EACH	_____	_____
00017	COMMODITY CODE: 175-74-000000 PERFORMANCE EVALUATION KIT BIO-RAD CAT #89894 OR APPROVED EQUAL DO NOT SHIP. TO BE CALLED IN AS NEEDED. MUST HAVE AT LEAST A 3 MONTH EXPIRATION DATE FROM DATE OF RECEIPT BY AGENCY SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	12	EACH	_____	_____
00018	COMMODITY CODE: 175-74-000000 CODA REAGENT C-VIALS, 500/CASE BIO-RAD CAT #4025900 OR APPROVED EQUAL DO NOT SHIP. TO BE CALLED IN AS NEEDED.	4	CASE	_____	_____

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	STATE QTY. PER CASE: _____  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____				
00019	COMMODITY CODE: 175-74-000000  EVOLIS LUBRICATION KIT  BIO-RAD CAT #89942 OR APPROVED EQUAL  DO NOT SHIP. TO BE CALLED IN AS NEEDED.  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	2	EACH	_____	_____
00020	COMMODITY CODE: 175-74-000000  VIROTROL I 1X5ML  BIO-RAD CAT #00100 OR APPROVED EQUAL  DO NOT SHIP. TO BE CALLED IN AS NEEDED.  MUST HAVE AT LEAST A 3 MONTH EXPIRATION DATE FROM DATE OF RECEIPT BY AGENCY  STATE QTY. PER PKG: _____  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	10	PKG	_____	_____
00021	COMMODITY CODE: 175-74-000000  VIROTROL HIV-2 1 X 5ML  BIO-RAD #00105 OR APPROVED EQUAL	6	PKG	_____	_____

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	DO NOT SHIP. TO BE CALLED IN AS NEEDED.  MUST HAVE AT LEAST A 3 MONTH EXPIRATION DATE FROM DATE OF RECEIPT BY AGENCY  STATE QTY. PER PKG: _____  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____				
00022	COMMODITY CODE: 175-74-000000  VIOCLEAR 10 X 4ML  BIO-RAD #00112 OR APPROVED EQUAL  DO NOT SHIP. TO BE CALLED IN AS NEEDED.  MUST HAVE AT LEAST A 3 MONTH EXPIRATION DATE FROM DATE OF RECEIPT BY AGENCY  STATE QTY. PER PKG: _____  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	5	PKG	_____	_____
00023	COMMODITY CODE: 175-74-000000  VIOTROL SYPHILIS TOTAL 1 X 5ML  BIO-RAD #00124 OR APPROVED EQUAL  DO NOT SHIP. TO BE CALLED IN AS NEEDED.  MUST HAVE AT LEAST A 3 MONTH EXPIRATION DATE FROM DATE OF RECEIPT BY AGENCY  STATE QTY. PER PKG: _____  SPECIFY BRAND (& NUMBER IF APPLICABLE)	12	PKG	_____	_____



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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00024	COMMODITY CODE: 175-74-000000  TWEEN 20, 100ML BOTTLE  BIO-RAD #25116 OR APPROVED EQUAL  IF APPLICABLE, REQUEST LONGEST EXPIRATION DATE POSSIBLE  DO NOT SHIP. TO BE CALLED IN AS NEEDED.  STATE QTY. PER KIT: _____  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	2	KIT	_____	_____
00025	COMMODITY CODE: 175-74-000000  REAGENT BOTTLE, EMPTY WRK, 20/PKG  BIO-RAD #26141 OR APPROVED EQUAL  DO NOT SHIP. TO BE CALLED IN AS NEEDED.  STATE QTY. PER PKG: _____  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	1	PKG	_____	_____
00026	COMMODITY CODE: 175-74-000000  AMBER REAGENT BOTTLE, 125ML, 72/CASE  BIO-RAD #92002 OR APPROVED EQUAL  DO NOT SHIP. TO BE CALLED IN AS NEEDED.  STATE QTY. PER CASE: _____	1	CASE	_____	_____

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00027	SPECIFY BRAND (& NUMBER IF APPLICABLE) _____ _____ COMMODITY CODE: 175-74-000000 VIAL, MICROTUBE 2 ML PP 500/BAG BIO-RAD #25221B OR APPROVED EQUAL DO NOT SHIP. TO BE CALLED IN AS NEEDED. STATE QTY. PER BAG: _____ SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	2	BAG	_____	_____
00028	COMMODITY CODE: 175-74-000000 CAP, SCREW 2ML NEUTRAL 500/BAG BIO-RAD #25222B OR APPROVED EQUAL DO NOT SHIP. TO BE CALLED IN AS NEEDED. STATE QTY. PER BAG: _____ SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	2	BAG	_____	_____
00029	COMMODITY CODE: 175-74-000000 PLATE CARRIER BIO-RAD #89679 OR APPROVED EQUAL MUST BE COMPATIBLE WITH INSTRUMENTATION DO NOT SHIP. TO BE CALLED IN AS NEEDED.	1	EACH	_____	_____

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	<p>*** ALL OF THE ABOVE ASSAYS MUST BE ABLE TO RUN ON ANALYZER</p> <p>*** ALL ITEMS ARE TO BE INSIDE DELIVERY</p> <p>AWARD TO BE MADE ON AN ALL OR NONE BASIS</p> <p>NOTE: ONLY BIDDERS BIDDING OTHER THAN BRAND SPECIFIED WILL BE REQUIRED TO ATTEND A MANDATORY JOBSITE VISIT. CONTACT JIM GILBERT AT (318) 221-0859 TO SCHEDULE AN APPOINTMENT.</p> <p>SPECIFY BRAND (&amp; NUMBER IF APPLICABLE)</p>				